## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10081579

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			10				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			// minus 20=		• 6			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS (1) min				nus 3 =	* -			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	EST
* If the difference in column 1 is less than zero, enter						olumn 2	L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	
		(Column 1)		(Colu		(Column 3)	1	SMALL E	NTITY	OR	SMALL	1 10 10
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=		X\$ 9=	Ų .	OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	T CLAIM		1	+140=		OR	+280=	
								TOTAL			TOTAL	
					0)	(0.1		ADDIT. FEE		JUN	ADDIT. FEE	
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	1 6		ADDI			ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	jka		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT							1	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	] [	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	] [	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=-	]	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						J					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	<u> </u>
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Tetal or Independent) is the highest number found in the appropriate box in column 1.												



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## NOTICE OF PARTIAL FEE / FEE DUE

Date:	03-	15-02				, ea.			
То:				•					
From:	RAM Tea	am, Office of Init	ial Patent Ex	caminatio	) DIL				
Subject:	Fee Due				•				
Application 1	Number <u>[</u> [	1081579		_					
The attached document was submitted with an insufficient fee. The Office of Initial Pater Examination has posted the fee submitted to the suspended fee code, 197. Please check the application for the appropriate authorization to charge a deposit account. If present, delivery a copy of the authorization, this form and the applicants submission to the Office of Initial Patent Examination, RAM Team, CP2-6C12. If an authorization is not present, notify the applicant of the fee deficiency.									
The correct fe	e, code:	202	amount	<b>s</b>	294				
The suspended	i fee code:	197	amount	-\$_					
Fee due			amount	= \$	294,0	D			
It is the Group total fee is pos the requested s		ility to collect the orrect fee code up	e balance of oon receipt o	the fee do	lue and ensure that ance due before p	at the providing			
Please direct a	ny questions	you may have to	Joyce Gun	ter-Warr	en at 308-3616.				